



Docket No.: 2450-0635P
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Ching-Hung WU et al.

Application No.: 10/779,611

Confirmation No.: 1047

Filed: February 18, 2004

Art Unit: 2686

For: AUXILIARY GUIDING DEVICE FOR THE
BLIND

Examiner: J. K. Contee

AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

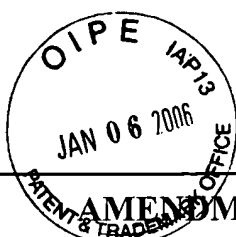
INTRODUCTORY COMMENTS

In response to the Examiner's Office Action dated October 6, 2005, the following amendments and remarks are respectfully submitted in connection with the above-identified application.

This reply includes:

Amendments to the Claims; and

Remarks.



IPW

AMENDMENT TRANSMITTAL LETTER				Docket No. 2450-0635P	
Application No. 10/779,611-Conf. #1047		Filing Date February 18, 2004		Examiner J. K. Contee	
Art Unit 2686					
Applicant(s): Ching-Hung WU et al.					
Invention: AUXILIARY GUIDING DEVICE FOR THE BLIND					
MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	10	- 20 =		x	
Independent Claims	1	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
_____ Joe McKinney Muncy Attorney Reg. No. 32,334				Dated: <u>January 6, 2006</u>	
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8026					